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**POWER OF ATTORNEY
and
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INDICATION FORM**

Application Number	10/077,982
Filing Date	February 19, 2002
First Named Inventor	Patrick R. Connolly
Title	See 1 in Addendum
Art Unit	3762
Examiner Name	
Attorney Docket Number	BTI-14

I hereby appoint:

Practitioners at Customer Number:

OR

Practitioner(s) named below:

Name	Registration Number
Duane C. Basch	34,545
Michael J. Nickerson	33,265

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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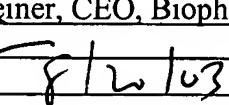
<input type="checkbox"/> Firm or Individual Name			
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I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Michael L. Weiner, CEO, Biophan Technologies, Inc.		
Signature			
Date	8/22/03	Telephone	(585) 214-2441

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

<input checked="" type="checkbox"/>	*Total of <u>1</u> forms are submitted.
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This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



Addendum

1. An Electromagnetic Interference Immune Tissue Invasive System

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**STATEMENT UNDER 37 CFR 3.73(b)**Applicant/Patent Owner: Patrick R. ConnellyApplication No./Patent No.: 10/077,982 Filed/Issue Date: February 19, 2002Entitled: An Electromagnetic Interference Immune Tissue Invasive SystemBiophan Technologies, Inc. Corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. the assignee of the entire right, title, and interest; or2. an assignee of less than the entire right, title and interest.The extent (by percentage) of its ownership interest is _____ %
in the patent application/patent identified above by virtue of either:A. An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 012988, Frame 0791, or for which a copy thereof is attached.**OR**B. A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

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 Additional documents in the chain of title are listed on a supplemental sheet. Copies of assignments or other documents in the chain of title are attached.[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

✓ 8/20/03Michael L. Weiner

Date

typed or printed name

(585) 214-2441

Telephone number

✓ M.L.W. Signature

CEO

Title

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3762

PTO/SB/92 (05-03)

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Michael J. Nickerson # 33,265

Typed or printed name of person signing Certificate

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The following papers listed below are submitted [BTI-14]:

Certificate of Mailing

Power of Attorney and Correspondence Address Indication Form

Statement under 37 CFR 3.73 (b)

Return Postcard

If any additional fees are due, please charge to Deposit Account 50-2737.

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If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.